| Application or Docket Num | | | | | | | | | | | per | | |
|---|--|---------------------|------------------|-------------|----------------|----------------|--------|---------------------|-----------------|---------|------------|--|--|
| | PATENT APPLICATION FEE DETERMINATION RECORD | | | | | | | | | | | | |
| Effective October 1, 2000 | | | | | | | | 09877374 | | | | | |
| CLAIMS AS FILED - PART I | | | | | | | | SMALL EN | OTHER THAN | | | | |
| TO | TAL CLAIMS | | (Column 1 |) | (Column 2) | | | TYPE | | OR L | SMALL E | | |
| TOTAL CLAIMS | | | 61 | | | | | RATE | FEE | | RATE | FEE | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEE | 355.00 | OR | BASIC FEE | 710.00 | |
| TOTAL CHARGEABLE CLAIMS | | | 6 / minus 20= | | . 41 | | | X\$ 9= | 369 | OR | X\$18= | | |
| INDEPENDENT CLAIMS | | | | | 1 | | | X40= | 40 | OR | X80≈ | | |
| MULTIPLE DEPENDENT CLAIM P | | | RESENT | | | | | +135= | | OR | +270= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | 724 | OR | TOTAL | | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | | 10 | OTHER | THAN | |
| 7=21=1) 4 (Column 1) | | | | (Colu | | (Column 3) | _ | SMALL | ENTITY | OR | SMALL | | |
| Image: Control of the con | | CLAIMS REMAINING | | HIGH NUM | | PRESENT | | | ADDI- | | RATE | ADDI- | |
| Ξ | | AFTER AMENDMENT | | | OUSLY | EXTRA | | RATE | TIONAL FEE | | HAIE | TIONAL FEE | |
| AMENDMENT A | Total | · 6 10 | Minus | - 6 | 1 | = | | X\$ 9= | | OR | X\$18= | | |
| | Independent | * 7 | Minus | | 3 | = | | X40= | | OR | X80= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | |] \ | | | | : 070 | | |
| | | | | | | | | +135= | | OR | +270= | | |
| | · . | | | | | | | TOTAL ADDIT. FEE | | OR | ADDIT. FEE | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING | | NUN | MBER IOUSLY | PRESENT | | RATE | ADDI- TIONAL | | RATE | ADDI- TIONAL | |
| | | AFTER AMENDMENT | | | FOR | EXTRA | | | FEE | | | FEE | |
| NON | Total | • | Minus | •• | | = | | X\$ 9= | | OR | X\$18= | | |
| NE NE | Independent | • | Minus | ••• | | = | 1 | X40= | | OЯ | X80= | | |
| Ľ | FIRST PRESENTATION OF MULTIPLE DEPENDENT | | | | IT CLAIM | | J | +135= | | 1 | +270= | | |
| | | | | | | | | TOTAL | | OR | TOTAL | | |
| | | | | | | • | | ADDIT. FEE | | JOR | ADDIT. FEE | | |
| (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI | | | | | | | | | | | | | |
| ပ | | REMAINING | | NUI | MBER | PRESENT | | RATE | ADDI- TIONAL | | RATE | ADDI- TIONAL | |
| NDMENT | | AFTER AMENDMENT | | | DFOR | EXITA | 4 | 154.6 | FEE | l | | FEE | |
| | Total | · | Minus | •• | | = |] | X\$ 9= | | OR | X\$18= | , | |
| AMEN | Independent | · | Minus | | | = | 1 | X40= | | OR | X80= | | |
| Ľ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | 1 | | | |
| G. L. Control of the | | | | | | | | | | | +270= | ↓ | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20. ** ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE | | | | | | | | | | | | | |
| | The Highest Nur | mber Previously P | aid For (Total o | ir indeper | ndent) is th | e highest numl | ber to | ound in the ap | propriate bo | ox in c | olumn 1. | | |